

1 RON BENDER (SBN 143364)
2 MONICA Y. KIM (SBN 211414)
3 KRIKOR J. MESHEFEJIAN (SBN 255030)
4 LEVENE, NEALE, BENDER, YOO & BRILL L.L.P.
5 10250 Constellation Boulevard, Suite 1700
6 Los Angeles, California 90067
7 Telephone: (310) 229-1234; Facsimile: (310) 229-1244
8 Email: RB@LNBYB.com, MYK@LNBYB.com, KJM@LNBYB.COM

9
10 Proposed Attorneys for Chapter 11 Debtors
11 and Debtors in Possession

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13
14
**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA
SAN FERNANDO VALLEY DIVISION**

15 In re:

16 IRONCLAD PERFORMANCE WEAR
17 CORPORATION, a California corporation,
18 Debtor and Debtor in Possession.

19 In re:

20 IRONCLAD PERFORMANCE WEAR
21 CORPORATION, a Nevada corporation,
22 Debtor and Debtor in Possession.

23 Affects both Debtors

24 Affects Ironclad Performance Wear
25 Corporation, a California corporation only

26 Affects Ironclad Performance Wear
27 Corporation, a Nevada corporation only

28 Lead Case No.: 1:17-bk-12408-MB

Jointly administered with:
1:17-bk-12409-MB

Chapter 11 Cases

**DECLARATION OF MONICA Y. KIM
IN SUPPORT OF DEBTORS'
EMERGENCY MOTION FOR ENTRY
OF AN INTERIM ORDER: (I)
AUTHORIZING THE DEBTORS TO
(A) OBTAIN POSTPETITION
FINANCING PURSUANT TO 11
U.S.C. §§ 105, 361, 362 AND 364, AND
(B) UTILIZE CASH COLLATERAL
PURSUANT TO 11 U.S.C. §§ 361, 362,
363 AND 364; (II) GRANTING
ADEQUATE PROTECTION
PURSUANT TO 11 U.S.C. §§ 361, 362,
363 AND 364; (III) SCHEDULING A
FINAL HEARING PURSUANT TO
BANKRUPTCY RULES 4001(b) AND
4001(c); AND (IV) GRANTING
RELATED RELIEF**

DATE: September 13, 2017

TIME: 2:00 p.m.

PLACE: Courtroom "303"
21041 Burbank Blvd.
Woodland Hills, CA

I, Monica Y. Kim, hereby declare as follows:

1. I have personal knowledge of the facts set forth herein, and, if called as a witness, could and would testify competently with respect thereto.

2. I am a member of Levene, Neale, Bender, Yoo & Brill L.L.P., proposed bankruptcy counsel to Ironclad Performance Wear Corporation, a California corporation (“Ironclad California”) and Ironclad Performance Wear Corporation, a Nevada corporation (“Ironclad Nevada” and with Ironclad California, the “Debtors” or “Ironclad”). The Debtors each filed a Voluntary Petition for relief under Chapter 11 of the Bankruptcy Code on September 1, 2017 (“Petition Date”).

3. On or about August 29, 2017, I obtained certified searches of recorded UCC-1 financing statements from the California Secretary of State (attached hereto as Exhibit A) and Nevada Secretary of State (attached hereto as Exhibit B). As set forth therein, the only active and valid UCC-1 financing statements existing as of the Petition Date are as follows:

California Secretary of State:

UCC-1 filed by Capital One (document number 14-7441632305) recorded December 18, 2014 as to substantially all assets of Ironclad California, assigned to Radians by UCC-3 (document number 62925880003).

Nevada Secretary of State:

UCC-1 filed by Capital One (document number 2014031733-1) recorded December 12, 2014 as to substantially all assets of Ironclad Nevada, assigned to Radians by UCC-3 (document number 2017020461-7)

I declare under penalty of perjury that the foregoing is true and correct.

Executed this 11th day of September 2017 at Los Angeles, California.

/s/ Monica Y. Kim

MONICA Y. KIM

EXHIBIT “A”



**SECRETARY OF STATE
STATE OF CALIFORNIA**

Search Certificate

SEARCH REQUESTED ON: 08/29/2017
Organization Debtor: **IRONCLAD PERFORMANCE WEAR CORP**

Address: **NOT SPECIFIED**
Date Range From: **NOT SPECIFIED**
Search: **ALL**

* Indicates Filings that have been accepted after the Certification Date.

<u>Original Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u>Lapse Date</u>	<u># of Pages</u>
12-7340381382	Financing Statement	12/11/2012	12:10	12/11/2017	1

Debtor:

Organization: IRONCLAD PERFORMANCE WEAR CORPORATION
2201 PARK PLACE STE 101, EL SEGUNDO CA USA, 90245-4909

Secured Party:

Organization: UNION BANK, N.A.
PO BOX 30115, LOS ANGELES CA USA, 90030

<u>Amendment</u> <u>Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u># of Pages</u>
15-74449934	Termination	01/13/2015	12:51	1

<u>Original Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u>Lapse Date</u>	<u># of Pages</u>
14-7441632305	Financing Statement	12/18/2014	15:51	12/18/2019	2

Debtor:

Organization: IRONCLAD PERFORMANCE WEAR CORPORATION
1920 HUTTON COURT, SUITE 300, FARMERS BRANCH TX USA, 75234

Secured Party:

Organization: CAPITAL ONE, N.A.
600 NORTH PEARL STREET SUITE 2500, DALLAS TX USA, 75201

RADIANS WAREHAM HOLDING, INC.
5305 DISTRIPLEX FARMS, MEMPHIS TN USA, 38141

Continue

Amendment

<u>Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u># of Pages</u>
17-75978114	Assignment	07/25/2017	14:52	1

<u>Original Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u>Lapse Date</u>	<u># of Pages</u>
15-7460728636	State Tax Lien	04/20/2015	17:00	04/20/2025	1

Debtor:

Organization: IRONCLAD PERFORMANCE WEAR CORP.
2950 31ST ST, SANTA MONICA CA USA, 90405 3098

Secured Party:

Organization: EMPLOYMENT DEVELOPMENT DEPARTMENT
PO BOX 826880, SACRAMENTO CA US, 94280

Amendment

<u>Filing #</u>	<u>Filing Type</u>	<u>File Date</u>	<u>File Time</u>	<u># of Pages</u>
15-74756241	Termination	07/17/2015	17:00	1

Total Pages: 7

The undersigned Filing Officer hereby certifies that the above listing is a record of all presently active financing statements, tax liens, attachment liens and judgement liens, including any change documents relating to them, which name the above debtor, subject to any above-stated search qualifiers and are on file in my office as of **08/24/2017 at 1700 hours**.

The search results herein reflect only the specific information requested. The results of this Debtor search will not reflect variances of this name. If the Debtor is known under other personal names, trade names, business entities, or addresses, separate searches of these names will have to be requested and conducted. The Secretary of State, his officers and agents disclaim any and all liability for claims resulting from other filings on which the name of the Debtor can be found in any other form than which was requested.



Alex Padilla
Secretary of State

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 800-858-5294
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) CORPORATION SERVICE COMPANY 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703 USA

DOCUMENT NUMBER: 46703080002
FILING NUMBER: 15-74449934
FILING DATE: 01/13/2015 12:51

IMAGE GENERATED ELECTRONICALLY FOR XML FILING
THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 12-7340381382	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed for record (or recorded) in the REAL ESTATE RECORDS. Filer Attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Item 13			
2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement				
3. <input checked="" type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b, and address of Assignee in Item 7c and name of Assignor in Item 9 For partial assignment, complete Items 7 and 9 and also indicate affected collateral in Item 8				
4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law				
5. <input checked="" type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <input checked="" type="checkbox"/> AND Check <u>one</u> of these three boxes to: This Change affects <input checked="" type="checkbox"/> Debtor or <input checked="" type="checkbox"/> Secured Party of record. <input type="checkbox"/> CHANGE name and/or address: Complete <input type="checkbox"/> item 6a or 6b; and item 7a and 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b				
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)				
6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	
	SUFFIX			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)				
7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME			
	INDIVIDUAL'S FIRST PERSONAL NAME			
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: For value received and in consideration of advances, present and future, and other obligations, debtor hereby grants a security interest in all of the following property:				
All present and hereafter acquired personal property including but not limited to all accounts, chattel paper, instruments, contract rights, general intangibles, goods, equipment, inventory, documents, certificates of title, deposit accounts, returned or repossessed goods, fixtures, commercial tort claims, insurance claims, rights and policies, letter of credit rights, investment property, supporting obligations, and the proceeds products, parts, accessories, attachments, accessions, replacements, substitutions, additions, and improvements of or to each of the foregoing.				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input checked="" type="checkbox"/> and provide name of authorizing Debtor				
OR	a. ORGANIZATION'S NAME MUFG Union Bank, N.A.			
	b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: Ironclad Performance Wear Corporation-21064/CA/3861901166 [95271735]				

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) William A. DeLoach (214) 740-1419
B. E-MAIL CONTACT AT FILER (optional)
C. SF Return acknowledgment to: Capitol Corporate Services, Inc. 455 Capitol Mall Ste 217, Sacramento CA 95814 800/327-4842

14-7441632305

12/18/2014 15:51

FILED

CALIFORNIA
SECRETARY OF STATE

SOS



46350570002 UCC 1 FILING

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME
Ironclad Performance Wear Corporation

OR

1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 1920 Hutton Court, Suite 300	CITY Farmers Branch	STATE TX	POSTAL CODE 75234	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); If any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

Capital One, N.A.

OR

3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 600 North Pearl Street Suite 2500	CITY Dallas	STATE TX	POSTAL CODE 75201	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

See attached Exhibit A

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction

Manufactured-Home Transaction

A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien

Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
6700.24

75743/mv

46350570002

Exhibit A

- (a) all Accounts of Debtor, whether now or hereafter existing, created, arising or acquired;
- (b) all Inventory of Debtor, whether now or hereafter existing, created, arising or acquired;
- (c) all Equipment of Debtor, whether now or hereafter existing, created, arising or acquired;
- (d) all General Intangibles of Debtor, whether now or hereafter existing, created, arising, or acquired, including, without limitation, the Intellectual Property;
- (e) without limitation to the foregoing, all contract rights, chattel paper, documents, documents of title, warehouse receipts, bills of lading, notes, and notes receivable instruments of Debtor, whether now or hereafter existing, created, arising, or acquired;
- (f) without limitation to the foregoing, all goods, instruments, notes, notes receivable, documents, documents of title, warehouse receipts, bills of lading, certificates of title, policies and certificates of insurance, securities, chattel paper, deposits, cash and other property now or hereafter owned by Debtor or in which it now or hereafter has an interest, which are now or may hereafter be in the possession of or deposited with Bank, or which are otherwise assigned to Bank, or as to which Bank may now or hereafter control possession by documents of title or otherwise;
- (g) all books and records now owned and hereafter acquired relating to any other Collateral and all files, correspondence, computer programs, tapes, disks and related data processing software owned by Debtor or in which Debtor has an interest that contains information concerning or relating to any of the other Collateral or any item thereof; and
- (h) all Proceeds and products of all of the foregoing, including, without limitation, insurance proceeds.

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)				
901-577-8115				
B. E-MAIL CONTACT AT FILER (optional)				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Baker, Donelson, Bearman, Caldwell & Berkowitz, PC 165 Madison Ave, Suite 2000 Memphis, TN 38103 USA				
DOCUMENT NUMBER: 62925880003 FILING NUMBER: 17-75978114 FILING DATE: 07/25/2017 14:52				
IMAGE GENERATED ELECTRONICALLY FOR WEB FILING THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY				
1a. INITIAL FINANCING STATEMENT FILE NUMBER 14-7441632305	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed for record (or recorded) in the REAL ESTATE RECORDS. Filer: Attach Amendment Addendum (Form UCC9Ad) and provide Debtor's name in item 13			
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement.				
3. <input checked="" type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8				
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law				
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <u>AND</u> Check <u>one</u> of these three boxes to: This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. <input type="checkbox"/> CHANGE name and/or address: Complete <input type="checkbox"/> Item 6a or 6b; and item 7a and 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b				
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)				
6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)				
7a. ORGANIZATION'S NAME Radians Wareham Holding, Inc.				
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS 5305 Distriflex Farms	CITY Memphis	STATE TN	POSTAL CODE 38141	COUNTRY USA
8. <input type="checkbox"/> COLLATERAL CHANGE: Also check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor				
OR a. ORGANIZATION'S NAME CAPITAL ONE, N.A.				
b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA:				

RECORDING REQUESTED BY:
STATE OF CALIFORNIA
EMPLOYMENT DEVELOPMENT DEPARTMENT
888-745-3886

WHEN RECORDED MAIL TO:
STATE OF CALIFORNIA
EMPLOYMENT DEVELOPMENT DEPARTMENT
LIEN GROUP, MIC 92G
PO BOX 826880
SACRAMENTO, CA 94280-0001

15-7460728636

04/20/2015 17:00



SOS

FILED

CALIFORNIA
SECRETARY OF STATE



48418310025 UCC 1 FILING

NOTICE OF STATE TAX LIEN

(Filed pursuant to Section 7171 of the Government Code)

IRONCLAD PERFORMANCE WEAR CORP.
2950 31ST ST
SANTA MONICA, CA 90405-3098

Secretary of State

Letter ID. L1659220160

Certificate No. G000952850

TAX PERIOD	TAX	PENALTY	INTEREST	TOTAL
01/01/2014 to 03/31/2014	\$0.00	\$807.27	\$38.33	\$845.60

Interest calculated through 04/14/2015

The Director of the Employment Development Department hereby certifies the above is liable to the State of California for amounts due and required to be paid as determined under the provisions of the California Unemployment Insurance Code, the Revenue and Taxation Code, or both.

THE AMOUNT OF DELINQUENCY ABOVE SET FORTH SHALL BE A LIEN UPON ALL REAL OR PERSONAL PROPERTY AND RIGHTS TO SUCH PROPERTY, INCLUDING ALL AFTER-ACQUIRED PROPERTY AND RIGHTS TO PROPERTY BELONGING TO THE ABOVE NAMED.

Date: 04/14/2015
At Sacramento, California



The Director of the Employment Development Department has complied with all provisions of the California Unemployment Insurance Code in the computation and levy of the amount assessed and has caused this notice of lien to be issued by a duly authorized representative.

Teresa Brage

By _____

Authorized Representative

This agency has adopted the use of a facsimile signature as affixed above.

RECORDING REQUESTED BY:
STATE OF CALIFORNIA
Employment Development Department
888-745-3886

WHEN RECORDED MAIL TO:
STATE OF CALIFORNIA
Employment Development Department
LIEN GROUP, MIC 92G
PO BOX 826880
SACRAMENTO, CA 94280-0001

1574756241

07/17/2015 17:00



FILED

CALIFORNIA
SECRETARY OF STATE



50020240026 UCC 3 FILING

**RELEASE OF LIEN
IMPOSED UNDER A CERTIFICATE OR NOTICE OF STATE TAX LIEN**

CERTIFICATE NO. G000952850

LETTER ID. L0563337920

The Director of the Employment Development Department of the State of California hereby releases and certifies that there has been released all property from any lien imposed thereon by the filing and recording of that certain Certificate or Notice of Amount of tax, penalty, and interest due under Section 1703 of the California Unemployment Insurance Code or Section 7171 of the Government Code from:

IRONCLAD PERFORMANCE WEAR CORP.
IRONCLAD PERFORMANCE WEAR CORP.

In the amount of \$845.60 which was recorded on 04/20/2015
in volume/page 15-7460728636 of Official Records of the Secretary of State



THE DIRECTOR OF THE EMPLOYMENT
DEVELOPMENT DEPARTMENT OF THE
STATE OF CALIFORNIA HAS CAUSED
THIS RELEASE TO BE ISSUED BY THE
DULY AUTHORIZED REPRESENTATIVE.

Date: 07/13/2015

This document is produced on a laser printer.

By

Teresa Brage

Authorized Representative
This agency has adopted the use of a
facsimile signature as affixed above.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Corporation Service Company 800-858-5294		DOCUMENT NUMBER: 35711180002 FILING NUMBER: 12-7340381382 FILING DATE: 12/11/2012 12:10 IMAGE GENERATED ELECTRONICALLY FOR XML FILING THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY																						
1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names																								
<table border="1"><tr><td>1a. ORGANIZATION'S NAME OR Ironclad Performance Wear Corporation</td><td colspan="2">FIRST NAME</td><td colspan="2">MIDDLE NAME</td></tr><tr><td>1b. INDIVIDUAL'S LAST NAME</td><td colspan="2"></td><td colspan="2">SUFFIX</td></tr><tr><td>1c. MAILING ADDRESS 2201 Park Place Ste 101</td><td colspan="2">CITY El Segundo</td><td>STATE CA</td><td>POSTAL CODE 90245-4909</td></tr><tr><td>1d. SEE INSTRUCTIONS</td><td>ADD'L DEBTOR INFO</td><td>1e. TYPE OF ORGANIZATION Corporation</td><td>1f. JURISDICTION OF ORGANIZATION CA</td><td>1g. ORGANIZATIONAL ID#, If any CA A0569223</td></tr></table>					1a. ORGANIZATION'S NAME OR Ironclad Performance Wear Corporation	FIRST NAME		MIDDLE NAME		1b. INDIVIDUAL'S LAST NAME			SUFFIX		1c. MAILING ADDRESS 2201 Park Place Ste 101	CITY El Segundo		STATE CA	POSTAL CODE 90245-4909	1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION CA	1g. ORGANIZATIONAL ID#, If any CA A0569223
1a. ORGANIZATION'S NAME OR Ironclad Performance Wear Corporation	FIRST NAME		MIDDLE NAME																					
1b. INDIVIDUAL'S LAST NAME			SUFFIX																					
1c. MAILING ADDRESS 2201 Park Place Ste 101	CITY El Segundo		STATE CA	POSTAL CODE 90245-4909																				
1d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	1e. TYPE OF ORGANIZATION Corporation	1f. JURISDICTION OF ORGANIZATION CA	1g. ORGANIZATIONAL ID#, If any CA A0569223																				
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names																								
<table border="1"><tr><td>2a. ORGANIZATION'S NAME OR Union Bank, N.A.</td><td colspan="2">FIRST NAME</td><td colspan="2">MIDDLE NAME</td></tr><tr><td>2b. INDIVIDUAL'S LAST NAME</td><td colspan="2"></td><td colspan="2">SUFFIX</td></tr><tr><td>2c. MAILING ADDRESS PO Box 30115</td><td colspan="2">CITY Los Angeles</td><td>STATE CA</td><td>POSTAL CODE 90030</td></tr><tr><td>2d. SEE INSTRUCTIONS</td><td>ADD'L DEBTOR INFO</td><td>2e. TYPE OF ORGANIZATION</td><td>2f. JURISDICTION OF ORGANIZATION</td><td>2g. ORGANIZATIONAL ID#, If any <input type="checkbox"/> NONE</td></tr></table>					2a. ORGANIZATION'S NAME OR Union Bank, N.A.	FIRST NAME		MIDDLE NAME		2b. INDIVIDUAL'S LAST NAME			SUFFIX		2c. MAILING ADDRESS PO Box 30115	CITY Los Angeles		STATE CA	POSTAL CODE 90030	2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, If any <input type="checkbox"/> NONE
2a. ORGANIZATION'S NAME OR Union Bank, N.A.	FIRST NAME		MIDDLE NAME																					
2b. INDIVIDUAL'S LAST NAME			SUFFIX																					
2c. MAILING ADDRESS PO Box 30115	CITY Los Angeles		STATE CA	POSTAL CODE 90030																				
2d. SEE INSTRUCTIONS	ADD'L DEBTOR INFO	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, If any <input type="checkbox"/> NONE																				
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)																								
<table border="1"><tr><td>3a. ORGANIZATION'S NAME OR Union Bank, N.A.</td><td colspan="2">FIRST NAME</td><td colspan="2">MIDDLE NAME</td></tr><tr><td>3b. INDIVIDUAL'S LAST NAME</td><td colspan="2"></td><td colspan="2">SUFFIX</td></tr><tr><td>3c. MAILING ADDRESS PO Box 30115</td><td colspan="2">CITY Los Angeles</td><td>STATE CA</td><td>POSTAL CODE 90030</td></tr></table>					3a. ORGANIZATION'S NAME OR Union Bank, N.A.	FIRST NAME		MIDDLE NAME		3b. INDIVIDUAL'S LAST NAME			SUFFIX		3c. MAILING ADDRESS PO Box 30115	CITY Los Angeles		STATE CA	POSTAL CODE 90030					
3a. ORGANIZATION'S NAME OR Union Bank, N.A.	FIRST NAME		MIDDLE NAME																					
3b. INDIVIDUAL'S LAST NAME			SUFFIX																					
3c. MAILING ADDRESS PO Box 30115	CITY Los Angeles		STATE CA	POSTAL CODE 90030																				
4. This FINANCING STATEMENT covers the following collateral: For value received and in consideration of advances, present and future, and other obligations, debtor hereby grants a security interest in all of the following property:																								
All present and hereafter acquired personal property including but not limited to all accounts, chattel paper, instruments, contract rights, general intangibles, goods, equipment, inventory, documents, certificates of title, deposit accounts, returned or repossessed goods, fixtures, commercial tort claims, insurance claims, rights and policies, letter of credit rights, investment property, supporting obligations, and the proceeds, products, parts, accessories, attachments, accessions, replacements, substitutions, additions, and improvements of or to each of the foregoing.																								
5. ALT DESIGNATION: <input type="checkbox"/> LESSEE/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILOR <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING																								
6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2																						
8. OPTIONAL FILER REFERENCE DATA IroncladPerform/21064/CA/CD [71931720]																								

FILING OFFICE COPY

EXHIBIT “B”

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State



KIMBERLEY PERONDI
*Deputy Secretary
for Commercial Recordings*

OFFICE OF THE
SECRETARY OF STATE

Certified Search Request

August 29, 2017

Job Number: U20170829-0052
Reference Number: 0001186005-5
Expedite: None
Through Date: 08/28/2017 05:00PM

The undersigned filing officer hereby certifies that the attached list is a true and exact list of all financing statements or federal tax liens and related subsequent documentation for the debtor below as filed with the Secretary of State's office, Uniform Commercial Code Division as of the above through date.

Search Criteria:

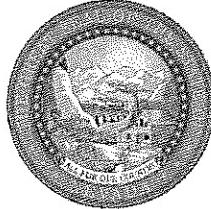
Debtor Name: IRONCLAD PERFORMANCE WEAR CORP
Lien Type: UCC
Lien Status: All (Including lapsed)

Nevada Secretary of State
Electronic Filing
Filing Officer

UCC DIVISION:

Tracy Gillespie, Supervisor
200 N. Carson Street
Carson City, Nevada 89701-4201
Telephone (775) 684-5708
Fax (775) 684-5630

STATE OF NEVADA



BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
*Deputy Secretary
for Commercial Recordings*

OFFICE OF THE
SECRETARY OF STATE

Financing Statement #2014031733-1
FILED: 12-12-2014 04:40 PM

(D) IRONCLAD PERFORMANCE WEAR CORPORATION
ORGANIZATION
1920 HUTTON COURT,
SUITE 300
FARMERS BRANCH, TX 75234 USA

(S) CAPITAL ONE, N.A.
ORGANIZATION
600 NORTH PEARL STREET
SUITE 2500
DALLAS, TX 75201 USA

(S) RADIAN WAREHAM HOLDING, INC.
ORGANIZATION
5305 DISTRIPLEX FARMS
MEMPHIS, TN 38141 USA

ACTIONS:
Initial Financing Statement
Assignment

	DATE	DOCUMENT #	PGS
Initial Financing Statement	12-12-2014 04:40 PM	2014031733-1	2
Assignment	07-25-2017 03:00 PM	2017020461-7	1



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

William A. DeLoach (214) 740-1419

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Return acknowledgment to:

Capitol Corporate Services, Inc.
P.O. Box 3100 Carson City, NV 89702
800/899-0490

Filed in the office of

Ross Miller
Secretary of State
State of Nevada

Document Number

2014031733-1

Filing Date and Time

12/12/2014 4:40 PM

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME		1b. INDIVIDUAL'S LAST NAME			
Ironclad Performance Wear Corporation					
OR		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1920 Hutton Court, Suite 300		Farmers Branch	TX	75234	USA
1d. SEE INSTRUCTIONS		ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
			corporation	Nevada	NV20041484929
<input type="checkbox"/> NONE					

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME		2b. INDIVIDUAL'S LAST NAME			
OR		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS		ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any
<input type="checkbox"/> NONE					

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR/S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME		3b. INDIVIDUAL'S LAST NAME			
Capital One, N.A.					
OR		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
600 North Pearl Street Suite 2500		Dallas	TX	75201	USA

4. This FINANCING STATEMENT covers the following collateral:

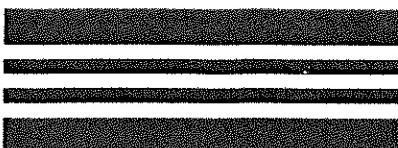
See attached Exhibit A.

5. ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. <input type="checkbox"/> The FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	[if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)	All Debtors	Debtor 1	Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						

06700.24

Exhibit A

- (a) all Accounts of Debtor, whether now or hereafter existing, created, arising or acquired;
- (b) all Inventory of Debtor, whether now or hereafter existing, created, arising or acquired;
- (c) all Equipment of Debtor, whether now or hereafter existing, created, arising or acquired;
- (d) all General Intangibles of Debtor, whether now or hereafter existing, created, arising, or acquired, including, without limitation, the Intellectual Property;
- (e) without limitation to the foregoing, all contract rights, chattel paper, documents, documents of title, warehouse receipts, bills of lading, notes, and notes receivable instruments of Debtor, whether now or hereafter existing, created, arising, or acquired;
- (f) without limitation to the foregoing, all goods, instruments, notes, notes receivable, documents, documents of title, warehouse receipts, bills of lading, certificates of title, policies and certificates of insurance, securities, chattel paper, deposits, cash and other property now or hereafter owned by Debtor or in which it now or hereafter has an interest, which are now or may hereafter be in the possession of or deposited with Bank, or which are otherwise assigned to Bank, or as to which Bank may now or hereafter control possession by documents of title or otherwise;
- (g) all books and records now owned and hereafter acquired relating to any other Collateral and all files, correspondence, computer programs, tapes, disks and related data processing software owned by Debtor or in which Debtor has an interest that contains information concerning or relating to any of the other Collateral or any item thereof; and
- (h) all Proceeds and products of all of the foregoing, including, without limitation, insurance proceeds.



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) STACEY LOFT	9015778115
B. E-MAIL CONTACT AT FILER (optional) SLOFT@BAKERDONELSON.COM	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
<p>STACEY LOFT BAKER DONELSON BEARMAN CALDWELL & BERKOWITZ, PC 165 MADISON AVENUE SUITE 2000 MEMPHIS TN 38103</p>	

Filed in the office of
Barbara K. Cegavske
Secretary of State
State of Nevada

Document Number
2017020461-7

Filing Date and Time
07/25/2017 3:00 PM

(This document was filed electronically.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
2014031733-1

1b. This FINANCING STATEMENT AMENDMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ac) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes:

This Change affects Debtor or Secured Party of record

AND Check one of these three boxes to:

CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR
6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME
RADIAN WAREHAM HOLDING, INC.

OR
7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS
5305 DISTRIPLEX FARMS CITY MEMPHIS STATE TN POSTAL CODE 38141 COUNTRY USA

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
CAPITAL ONE, N.A.

OR
9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is: 10250 Constellation Boulevard, Suite 1700, Los Angeles, CA 90067

A true and correct copy of the foregoing document entitled **DECLARATION OF MONICA Y. KIM IN SUPPORT OF DEBTORS' EMERGENCY MOTION FOR ENTRY OF AN INTERIM ORDER: (I) AUTHORIZING THE DEBTORS TO (A) OBTAIN POSTPETITION FINANCING PURSUANT TO 11 U.S.C. §§ 105, 361, 362 AND 364, AND (B) UTILIZE CASH COLLATERAL PURSUANT TO 11 U.S.C. §§ 361, 362, 363 AND 364; (II) GRANTING ADEQUATE PROTECTION PURSUANT TO 11 U.S.C. §§ 361, 362, 363 AND 364; (III) SCHEDULING A FINAL HEARING PURSUANT TO BANKRUPTCY RULES 4001(b) AND 4001(c); AND (IV) GRANTING RELATED RELIEF** will be served or was served (a) on the judge in chambers in the form and manner required by LBR 5005-2(d); and (b) in the manner stated below:

1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On **September 11, 2017**, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

- Ron Bender rb@lnbyb.com
- S Margaux Ross margaux.ross@usdoj.gov
- United States Trustee (SV) ustpregion16.wh.ecf@usdoj.gov
- Sharon Z. Weiss sharon.weiss@bryancave.com, raul.morales@bryancave.com

2. SERVED BY UNITED STATES MAIL: On **September 11, 2017**, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

Service information continued on attached page

3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on **September 11, 2017**, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

Served via Attorney Service

Hon. Martin R. Barash
United States Bankruptcy Court
21041 Burbank Boulevard, Suite 342
Woodland Hills, CA 91367

Service List served by Overnight Mail attached

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

September 11, 2017

Date

Stephanie Reichert

Type Name

/s/ Stephanie Reichert

Signature

Served by Overnight Mail:

Ironclad Performance Wear (8300)
OUST, Secured & Top 20

United States Trustee
915 Wilshire Blvd., Suite 1850
Los Angeles, California 90017

U. S. Securities and Exchange
Commission
Attn: Bankruptcy Counsel
444 South Flower Street, Suite 900
Los Angeles, CA 90071-9591

Secured Creditor

Radians Wareham Holding, Inc.
Attn: Mike Tutor, CEO
5305 Distriplex Farms
Memphis, TN 38141

Counsel to Radians Wareham Holdings
E. Franklin Childress, Jr.
Baker, Donelson, Bearman, Caldwell &
Berkowitz, PC
165 Madison Ave, Suite 2000
Memphis, Tennessee 38103

Counsel to Radians Wareham Holdings
Sharon Z. Weiss
Bryan Cave
120 Broadway, Suite 300
Santa Monica, CA 90401

Top 20 Unsecured Creditors:

Advantage Media Services, Inc.
Attn: Steven Helmle
29010 Commerce Center Drive
Valencia, CA 91355

Danny Negara
Mercindo Global Manufaktur
Jl. Raya Semarang-Bawen Km.29
SEemerang, Central Java
50661, Indonesia

Eliza Yang
Nantong Changbang Gloves Co.
Flat/RM 1602 Chit Lee Comm
Bldg 30-36, Shau Kei Wan Road
Hong Kong, China

Gerard
BDO USA, LLP
P. O. BOX 677973
Dallas, TX 75267-7973

Kwong
PT JJ GLOVES INDO
JL Ronggowsito, Mlese, Ceper
Bonded Zone, Klaten
Central Java, Indonesia, 57463

Mark Robba
PT SPORT GLOVE INDONESIA
Krandon Desa Pandowoharjo
Sleman
Yogyakarta, Indonesia, 55512

Daniel Gomes
Capital One Bank
P. O. BOX 1917
Merrifield, VA 22116-1917

Brent Waters
Resources Global Professionals
P.O. Box 740909
Los Angeles, CA 90074-0909

Skadden Arps Slate Meagher & Flom
LLP
P O Box 1764
White Plains, NY 10602

Carol Pearson
FedEx
PO Box 7221
Pasadena, CA 91109-7321

Risk Consulting Partners
24722 Network Place
Chicago, IL 60673-1247

Robert Tejeda
Stubbs, Alderton & Markiles, LLP
15260 Ventura Blvd
20th Floor
Sherman Oaks, CA 91403

Ms. Vicz Yue
Ka Hung Glove Industrial Co. Ltd.
Fujian Quanzhou Jiacheng Leather
Chi Feng Road, Quanzhou City
Fujian, 362000, China

Shur-Sales & Marketing, Inc.
3830 S Windermere St.
Englewood, CO 80110

John Calhoun
Synetra
1110 E. State Highway 114
Suite 200
Southlake, TX 76092

Sky Lin
Marusan - Mimasu Tshusho Co. Ltd.
No 1 Queen' Road Central
Hong Kong
China

Carla Durand
University of Milwaukee
P O Box 500
University of Wisconsin - Milwaukee
Milwaukee, WI 53201

Bradley J. S. Weiss
Winspeed Sports Shanghai Co., Ltd.
858 Mingzhu Road
Shanghai
China, 00020-1702

Janice Lee
Woneel Midas Leathers
JI Gembor Raya Desa Pasirjaya
Tangerang
Banten, Indonesia, 15135

Liliana Dominguez
Yellow and Roadway
P. O. Box 100129
Pasadena, CA 91355

1920 Hutton Court
Attn: Johnny Clark
Inwood National Bank
P O Box 857413
Richardson, TX 75085